

From Soldiers To Citizens: Veterans Battle Stresses of Combat *Physical, mental, emotional wounds can heal with time, treatment*

By Linda Salsberry, The Press and Standard

The barrage of information was overwhelming at Friday's day-long education program "Citizen Soldier Working with Veterans of Iraq and Afghanistan and Their Families".

"It's real," said Bob Goodale, program manager of the Citizen Support Program, National Demonstration Project, speaking of the need to reach those re-turning from combat, especially those coming home to rural areas and help them cope with physical and mental issues they may or may not recognize or understand are combat-related.

The program, he said, is about information and about geographic access to services. It has been presented about 20 times in North Carolina reaching a total of 2,000 civilians. Many more people need to be aware, he said. Friday's program at Veterans Victory House Nursing Home was presented by Lowcountry



Speakers From Left to Right: Harold Kudler, MD, Duke University Medical Center; Erin Simmons, Ph.D., LT USN, Staff Psychologist & Program Director; and Bob Goodale, BS, MBA, Program Manager, Citizen Support Program-National Demonstration Project

Area Health Education Center with about 40 healthcare and social services workers from Colleton, Charleston and Beaufort counties attending.

They learned that the stresses and symptoms — depression, substance abuse, anxiety, irritability, sleeplessness — are real, and surprisingly similar for personnel in conflict and family members at home. They learned to be sensitive when asking questions. For example, "Did you see any camels?" can just become annoying. "Did you kill anybody?" is probably not appropriate for many reasons.

Caregivers were reminded that they have to take care of themselves, too, and find that balance between too involved and too callous. Don't ask

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Office of Healthcare Workforce Analysis and Planning Established

Like many states, South Carolina has a shortage of critical healthcare personnel in rural areas of our state, as well as in our hospitals and inner-city neighborhoods. It is estimated that 586,500 citizens do not have access to a primary care provider in their home community, almost 1 million do not have local access to dental care, and 1.5 million do not have access to mental healthcare providers.¹ In order to meet the needs of these citizens, South Carolina would require an additional 259 primary care providers, 289 dental care providers, and 140 mental health providers over the number currently in practice. Additionally, while the recent economic recession has eased the nursing shortage temporarily, it has been estimated that SC will have only about 68% of the Registered Nurse workforce needed in 2020 - a shortage of more than 12,000 RNs² - unless nursing programs are greatly expanded. Yet, currently there is not enough nurse faculty in South Carolina to allow such expansion to take place.

A new Office of Healthcare Workforce Analysis and Planning (OHWAP) has been established to help the state address these

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SOUTH CAROLINA AHEC
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the questions if you are not prepared to deal with the answers.

One of the main speakers, Erin Simmons, Ph.D., Lt. U.S. Navy, experienced aspects of the stresses during the program. She heard from her husband, deployed the day before, who was able to call from someplace near the Middle East with Internet access, to tell her he had arrived safely, though not at his final station.

In the morning session, Simmons, a psychologist, talked about military culture and lingo and why basic training for all branches of the service is about strict discipline, the traditions and customs. First, because that establishes a basis for what they will need when going into battle. Second, it creates bonds, ties that civilians can't imagine.

"It's a comfort," she said. "You can go on any military base in the world and have a common background. That group cohesiveness is the most protective thing for stress."

She admitted the military speaks in acronyms and suggested those caring for anyone who has been in the military should be familiar with terms to "smooth out therapy."

RPG, for example, means rocket propelled grenade, and ROE stands for rules of engagement, which cause a great deal of frustration. (ROE, for example, do not allow personnel to shoot someone unarmed and in the vicinity of a bomb. ROE, under certain conditions, require the convoy continue moving forward even if women or children are in the path).

Harold Kudler, a psychiatrist who coordinates mental health services for a three -state region of the U.S. Dept. of Veterans Affairs, provided an overview of the "extremely large system" that supplements local healthcare professionals' work.

He said there are 23.4 million veterans in this country and about 75 percent of them served during a conflict. One-fourth of the nation's population is eligible for veteran benefits. Veterans Affairs has 153 medical centers, 909 outpatient clinics for mental and primary care, 47 rehabilitation treatment programs and, what Kudler considers most important, 232 vet centers, outreach programs in communities that

provide resources, programs and an opportunity for veterans to talk to one another.

The giant bureaucracy, he said, has a computer that knows every veteran in America. The total for this war now stands at 908,690. Because of improved efforts to reach those returning from combat, he said, 41 percent have sought care.

Kudler told the medical personnel and social agency workers attending and receiving continuing education credit, "Do not prepare to treat the war as seen on television." He meant that only a small percent of personnel return home with obvious wounds, such as burns or amputations.

"We don't recognize the people who need our help," he said, adding the most frequent issues are musculoskeletal and mental health. Many visit their family doctors in civilian clothes and do not mention they were in combat. You have to ask, he said.

In a later session, Kudler talked about post traumatic stress disorder, traumatic brain injuries and combat stress injuries. He said that in a study published in 2007, which interviewed more than 88,000 soldiers who had been in Iraq, it was found that 20 percent of those on active duty and 42 percent of reservists were identified as needing treatment during the first six months of being home.

Treatment could be for post traumatic stress disorder, substance abuse (drugs, alcohol, excessive smoking), depression, sleeplessness, minor brain injuries not always identified and isolation.

"You are not crazy if you withdraw when you are overwhelmed," Kudler said.

Simmons returned to talk about family concerns and the many issues involved when those who experienced combat return home.

"Everyone has problems when returning," she

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South Carolina Area Health Education Consortium

Executive Director
David R. Garr, MD

South Carolina AHEConnects Editor
Ragan DuBose-Morris, MA

said. The number one issue is sleeplessness. The second most common issue is irritability.

Forgetfulness often increases and the ability to concentrate often decreases. All of these issues can affect returning to a civilian job or going to school. Inability to hold a job or stay in class leads to financial problems, which can lead to abuse problems.

People come home and they are different people. Those who stayed home and took on more responsibilities and found new interests changed too.

"It just sort of builds," she said. "Social support from people you trust is the best therapy we've got."

Adjustments are possible, they just take time.

She closed with her "rules of thumb" she shares with service personnel and their family members before needed.

1. Avoid the squabbling matches. ("Well, I was in the combat zone." "Well, I took care of your three kids and the house, car, finances.")
2. Be careful of the fairy tale. Expectations are rarely fulfilled.

3. Create realistic expectations. If you want a big party at the airport when you return, say so. If you don't want anyone there, explain that before you arrive.
4. Timing. Think about actions and communications. Don't rattle off a to-do list for the weekend that's two days away. Don't ask for a divorce on the ride home.
5. Be careful of the questions.

She said she has a 6th rule, but she couldn't remember it on Friday. When she returned from Fallujah, Iraq, forgetfulness was a major problem for her.

Later afternoon sessions involved a review of Tricare, the medical insurance provided to those on active duty and their families, and more a clinical discussion of issues and guidelines regarding symptoms and treatments.

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TELLING HIS STORY. The Rev. Patrick Appleget has served in combat zones and provided many critical incident stress debriefings. Talking is part of his own therapy he said during Citizen Soldier, a program for healthcare professionals, social workers and chaplains to help them better serve personnel returning from combat. Appleget is more comfortable talking to military personnel, those who know about injuries, survivor guilt and substance abuse, all part of his own life.

As Chaplain and Veteran, Appleget Knows About the 'Other World' of Soldiers

By Linda Salsberry, The Press and Standard

Patrick Appleget is a chaplain and a veteran. In the past few decades, he has served in combat zones in several conflicts around the world. He told the healthcare professionals and social agency workers that his presentations for the Citizen Soldier program are part of his therapy for Post Traumatic Stress Disorder (PTSD).

PTSD is cumulative, it was learned in the all-day session. Appleget can list several events involved in his own symptoms. One was realizing 100 people he knew and worked with were killed in the very building he had been sleeping in just a few minutes before.

"You're living in a world that's not real," he said of being in a combat zone. He has experienced guilt, for surviving when others around him have not, for not being able to actively participate, for feeling an adrenaline rush during a firefight, for minor injuries, for being an alcoholic and in the clergy.

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"The only person I wanted to talk to was someone who I knew was there," he said.

Even walking into the meeting room of the Veterans Victory House Nursing Home where the session sponsored by the Lowcountry Area Health Education Center was conducted, he talked little to others unless addressing the crowd, and selected a chair against the back wall facing the door.

Veterans who have been in combat, according to Appleget, tend to cradle themselves, isolate themselves even though "the worst thing to do is pull back," he said. The best thing to do, he said, though he knows it is difficult, "is stretch yourself."

Appleget did just that by agreeing to answer questions. With the first one, he explained that soon after he returned from Desert Storm, his first wife filed for divorce. "I'm on my last wife," he said. "She's very understanding. The kids are distant." He said it is very strange for him to have a daughter in Iraq.

When asked for coping techniques, his first word was "drugs" (a prescribed medication) and his next suggestion was deep breathing. Try to normalize the situation. say to yourself, "This is a crazy thought, it will go away."

James White, veterans affairs officer in Colleton County, interjected. "One of the most important things I've learned is to listen." He said that is true and effective for veterans of World War II, Vietnam and Iraq.

Appleget said everyone providing care for veterans needs to listen. "They come in for a foot injury, but there could be a whole lot behind it," he said.

Later in the program, after a presentation about health benefits for veterans on active duty and retired, and their families, White asked about getting more providers signed on to participate in small towns.

"I need you to target Walterboro," he told Linda Conner, the service center manager with the Tricare program based at Shaw Air Force base.

"Walterboro has been a challenge," she said.

Tricare's Web Site is www.tricare.mil. The Department of Veteran Affairs Web site is www.va.gov.

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problems and create effective long-range strategies to ensure an adequate healthcare workforce. Founded with a four-year, \$2.1 million start-up grant from The Duke Endowment, the OHWAP is currently housed in the South Carolina AHEC at the Medical University of South Carolina. The winning grant proposal was a collaborative effort between the South Carolina AHEC, the Center for Nursing Leadership at the USC College of Nursing, and the South Carolina Budget and Control Board's Office of Research and Statistics.

The grant will support the new Office of Healthcare Workforce Research for Nursing within the USC College of Nursing, led by Mary Foster Cox as the Project Coordinator. This entity will focus on nursing workforce issues in the state. Their work will include profiling the current workforce; developing future supply and demand projections for nurses; studying the state's nursing education pipeline by monitoring trends in the number of students admitted, enrolled, graduating and remaining in active practice within the state; and developing estimates of changes needed in the South Carolina educational system to address the expected demand for nurses.

The OHWAP will oversee and coordinate the work of the USC Office of Healthcare Workforce Research for Nursing with the other study groups that will be assembled around healthcare workforce issues facing our state. The work of all these groups will draw heavily on healthcare information compiled over the years by the SC Office of Research and Statistics to improve our understanding of the dynamics in the healthcare workforce in South Carolina.

An Advisory Council has been established to provide oversight and help the OHWAP decide which issues to address first. Three projects have been identified: the development of nurse workforce supply and demand measures and projections for the state; a profile of the current supply of physicians in the

OFFICE OF HEALTHCARE WORKFORCE ANALYSIS & PLANNING

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state and how well it meets the needs of the state's population; an analysis of how the demand for primary care services is likely to change in the future due to an aging population and/or healthcare reform measures; and what will be needed to make certain that South Carolina has enough providers with the right skills to provide those services.

Ms. Linda M. Lacey, a veteran workforce analyst who has helped several states establish similar Offices, assumed the role of OHWAP Director in August, 2009. She will be joined by a full-time research analyst and an administrative assistant once the OHWAP is fully underway. Together they will oversee the work of the study groups, conduct original research and secondary data analyses relevant to the studies in progress, and provide technical support to their collaborating partners. The reports and publications generated by the OHWAP will provide legislators, education administrators, healthcare educators, hospital administrators and others with detailed and current information needed to make informed policy and planning decisions regarding healthcare workforce issues.

Multidisciplinary steering committees composed of different types of healthcare providers, educators, consumers, and policy-makers are currently being formed to provide OHWAP with a broad perspective on the issues. Anyone interested in participating in the work of the OHWAP is encouraged to contact Ms. Lacey in the South Carolina AHEC program office.

The Duke Endowment, in Charlotte, N.C., seeks to fulfill the legacy of James B. Duke by enriching lives and communities in the Carolinas through higher education, healthcare, rural churches and children's services. Since its inception in 1924, the Endowment has awarded more than \$2.4 billion in grants.

1 These figures are based on Health Research and Services Administration estimates of the underserved population in designated Health Professional Shortage Areas in South Carolina as of Sept. 9, 2009.

2 National Center for Health Workforce Analysis, Bureau of Health Professions, Health Resources and Services Administration, 2004.

New Director Named for OHWAP



In August, Linda M. Lacey joined the South Carolina AHEC as the Director of the Office of Healthcare Workforce Analysis and Planning (OHWAP). In that role she will seek out partners interested in healthcare workforce issues across South Carolina and develop collaborative relationships with those partners to secure, share and/or utilize the information needed to illuminate policy discussions and decisions affecting the state.

Ms. Lacey anticipates that the information generated through the OHWAP will help to inform policy decisions related to healthcare educational programs in the state; legislative initiatives to improve access to healthcare for our citizens; and assist healthcare facilities and agencies in understanding the factors that influence the available supply of healthcare professionals and practitioners in the state.

Ms. Lacey began her career in health services research at the Cecil G. Sheps Center for Health Services Research at the University of North Carolina - Chapel Hill and later spent more than 15 years implementing a comprehensive, strategic program of research focused on the nursing workforce as the Associate Director of the North Carolina Center for Nursing. She holds a Master's degree in Sociology from Duke University and a Bachelor of Business Administration from Lambuth University.

In her free time, Linda enjoys making her own jewelry and painting. She is also looking forward to exploring South Carolina's many lovely hiking, paddling, and fishing spots.

She can be contacted at lacey1@musc.edu or 843-792-1655.

Resident Scholarship Symposium Held at Hickory Knob State Park

The 2009 South Carolina AHEC Resident Scholarship Symposium was held at Hickory Knob State Park in McCormick, SC. Residents from the AHEC-affiliated residency programs were invited to participate in the two day event in May. A total of 54 residents attended the conference along with the eight Family Medicine Residency Program Directors and their faculty.

On Friday morning, a Chief Residents' Seminar designed for physicians who will be chief residents during the 2009-10 academic year was held. The session was conducted by Franklin Medio, Ph.D., Consulting Services for the Health Professions. The agenda included workshops on "Being an Effective Chief Resident" and "Becoming an Effective Clinical Teacher". Chief residents from each Family Medicine Residency Program attended the seminar.

On Friday afternoon and Saturday morning, the Scholarship Symposium provided an opportunity for residents to present brief 10 minute scholarly presentations. Presentations were categorized into basic research and quality improvement projects.

The distinguished panel of judges for the symposium were: Stoney Abercrombie, MD, Director of Medical Education and Family Medicine Residency Program Director, Anderson Area Medical Center; Ronald Januchowski, DO, Assistant Director, Spartanburg Regional Healthcare System Family Medicine Residency Program; and Lori Dickerson, PharmD, Assistant Family Medicine Residency Program Director, Trident/MUSC Family Medicine Residency Program. Bruce Hanlin, MD, Program Director for the Family Medicine Residency Program at Greenville, was moderator for the symposium.

An Awards Luncheon was held after the Hickory Knob Symposium and cash prizes were presented to the following winners by Dr. Robert Hanlin:



QUALITY IMPROVEMENT

1st Place - \$300.00

"Improving Code Status Documentation in Elderly Primary Care Patients"

Amanda Sommerfeldt, MD

McLeod Family Medicine Residency Program

2nd Place - \$150.00

"Rate of Contraceptive Counseling When Prescribing Reproductive-Aged Women Teratogenic Medications in a Resident Clinic"

Melissa D. Fritsche, MD

Spartanburg Family Medicine Residency Program



3rd Place - \$100.00

"Is Vitamin D Deficiency Under-Diagnosed in Nursing Home Patients?"

Balasukanya Balaraman, MD and Antoinette Rhynes, MD

AnMed Health Family Medicine Residency Program

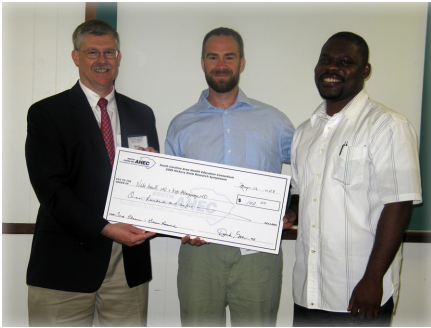
RESEARCH

1st Place - \$300.00

"Comparison of Physician-Patient Recall in a Family Medicine Residency Practice"

Nathan J. Averill, MD and Kojo Abbeyquaye, MD

Trident/MUSC Family Medicine Residency Program



2nd Place - \$150.00

"Obesity and Depression in Women"

Cheryl Atherley-Todd, MD

AnMed Health Family Medicine Residency Program



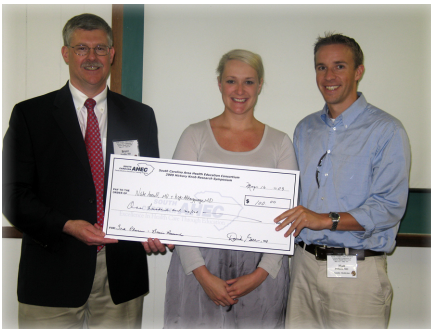
3rd Place - \$100.00

"Ergogenic Use in College

Students: Students vs. College Sponsored Athletes"

Stacy Caudill, MD and Matt Pollack, MD

Trident/MUSC Family Medicine Residency Program



POSTER SESSION WINNER

\$50.00

"Identification of Methods of Improvement for Influenza Vaccination at Center for Family Medicine Using a Standing Order Form"

Blythe Winchester, MD

Greenville Family Medicine Residency Program



This event was sponsored by the South Carolina AHEC Family Medicine Residency Directors. If you have any questions, please contact Becky Seignious, Director, AHEC Recruitment and Retention Programs at 843-792-4439 or seignior@musc.edu.

Carson Brings Novel Approach to Education



Dr. Deborah Stier Carson is the new Associate Program Director for Education for South Carolina AHEC. She first joined SC AHEC in October 2003, as the Program Manager on a federal grant for the training of community healthcare professionals in disaster preparedness known as the SC AHEC Disaster Preparedness and Response Training (DPRT) network. She, along with Dr. Lancer Scott and MUSC medical student Brian Greenwell, recently had a manuscript accepted for publication in the *Journal of Emergency Medicine* describing a novel approach to Disaster Medicine Training for medical students that was developed with other members of the DPRT network in collaboration with the Medical University of South Carolina College of Medicine.

She is a Fellow of the American College of Clinical Pharmacy and received her undergraduate degree in Pharmacy in 1976 from the Medical University of South Carolina (MUSC) College of Pharmacy and her Doctor of Pharmacy from the same institution in 1982. After 26 years serving on the faculty of the MUSC College of Pharmacy with a joint appointment in the Department of Family Medicine, College of Medicine, Dr. Carson retired in 2002. She was awarded the title of Professor Emerita and continues to serve the University as a volunteer Clinical Professor and remains professionally interested in women's health issues.

If You Hear Hoofbeats... It's Probably a Zebra

Rachel Hansen, MD, AnMed Family Residency Program

After finishing my intern year in Family Medicine at the AnMed Family Residency program, I spent a month at a rural mission hospital in Kenya. It wasn't an adventure trip—this is part of the curriculum for the International Track that was introduced into our program this past year. This track is designed to prepare residents, like myself, who hope to either work in an underserved area of the world or lead / participate in short-term medical trips to areas of great need. It is difficult to communicate the value of a trip like this—which goes far deeper than the obvious benefits of learning tropical diseases, enhanced procedural training, and understanding of limited resource settings. Following are my journal entries from this mission:

"July 6, 2009: In three short days I have seen so many diseases that I've never seen before--TB meningitis, neurosyphilis, Ricketts cardiomyopathy, organophosphate poisoning, cryptococcal meningitis, and an assortment of weirdo fungal infections—all of which appear to be 'old hat' here. I feel like I have been tossed into a whole new world of medicine--a very different world that functions with different focus and priorities. The old sage medical saying, 'If you hear hoofbeats, it's most likely a horse and not a zebra,' is strangely reversed here in Kenya. When you hear hoofbeats, it's probably a zebra."

"July 9, 2009: Last night I stayed late to help with the last few outpatient visits. At 8:30 pm I was rushing through a few final patients. A tall gaunt man comes in who has been waiting all day. It turns out that he's a pastor from Sudan who has traveled for three days to reach this hospital to try to get help with the debilitating pain and weakness in one of his legs. He handed me a big

stack of medical records and immediately I realized that there was no easy straightforward answer. Honestly, all I really wanted to do was give him a quick answer, so I could get dinner and go to bed. But in that moment I was reminded of what Jesus said—"as much as you've done it for the least of these my brothers, you have done it for Me". This man matters in a big way—he bears the image of God. And something in that made my heart really break for him. He'd been searching for an answer for three years, he finally gets enough money to travel to a "big hospital," he gets here and waits around all day... and finally he gets ten minutes with me—the

little squirt who just finished her intern year. Something just doesn't seem right here. With a lot of extra time invested over the next two days, he was able to get the appropriate tests and referrals that he needed. But it really struck me how much true need there is and how easy it is to blow by the need if I'm focused on my own agenda."

"July 17, 2009: Yesterday I got entangled in a discussion over a woman

who had developed significant respiratory distress after surgery and looked like she would need reintubation—necessitating a bed in the ICU. But the ICU attending had just come to admit the lady in the bed next to her-- to the one open bed in the ICU. So now we are looking at two women lying side by side, within three feet of each other. Both need ICU care. Both have families waiting who love them. One is in her eighties, but has a fairly good prognosis. The other is barely into her thirties but has cancer that will likely take her life in the next 6 months. There is a good chance that either one will die if they don't get that bed. But there is only one bed... When you're in residency you can almost get into this mindset that medicine is just for fun and intellectual curiosity. But it's not. It's life and death—you hold people in your hands in a way that is so sacred and scary."

"July 25, 2009: Rebecca. The first thing I noticed about her was her eyes—they're piercing and deep and look way too wise and questioning for her age. There's a good reason for that: her body is deceptively small, only about the weight of a fat 6



month old back home, although she is now well over two years old. She still can't walk, not because anything is wrong with her legs, but because her development has been stunted by severe malnutrition. Her hair is thin and sparse, her bones are bowing from Rickets. Her mother and father both work long hours in a city down the road. Their love and sacrifice for her puts me to shame, but their care is restricted by finances. The vitamin supplements that she needs cost almost as much for one bottle as many people around here make in a month. The stunning contrast is that

"...in less than 72 hours, I'll be back in Anderson, SC- treating childhood obesity."

I'll say goodbye to Rebecca this morning, get on a plane, and in less than 72 hours, I'll be back in Anderson, SC--treating childhood obesity."

Can I say that a trip like this makes a sizeable dent in the health needs of the Kenyan people? That would be grossly naïve. But I do hope that Africa has made a dent in me—in my first-world, endless-resource perspective on medicine and life—and that as a result I'll be better prepared to effectively serve people both here in South Carolina and abroad.

Stroke Education Available Through Mid-Carolina AHEC

Pam Bartley, RN, BS, CEN, CCRN, Education Coordinator, Mid-Carolina AHEC

A stroke is a "brain attack", restricting vital blood flow and oxygen to an area of the brain. According to South Carolina DHEC statistics, South Carolina had the second highest stroke death rate in the nation in 2003 and is among a group of Southeastern states with high stroke death rates that is referred to as the "Stroke Belt."

In the United States, stroke is the third leading cause of death, killing 144,000 people each year, and is a leading cause of long-term adult disability. Approximately 795,000 strokes will occur this year. According to www.stroke.org the estimated direct and indirect cost of stroke for 2009 is \$68.9 billion. Stroke can happen to anyone at any time, regardless of race, sex or age. There are 2 types of stroke:

- Ischemic stroke occurs when arteries are blocked by blood clots or by the gradual build-up of plaque and other fatty deposits. About 87 % of all strokes are ischemic.
- Hemorrhagic stroke occurs when a blood vessel in the brain breaks leaking blood into the brain. Hemorrhagic strokes account for 13% of all strokes.

Common stroke symptoms include:

- Sudden numbness or weakness of the face, arm or leg – especially on one side of the body
- Sudden confusion, trouble speaking or understanding
- Sudden trouble seeing in one or both eyes
- Sudden trouble walking, dizziness, loss of balance or coordination
- Sudden severe headache with no known cause

Stroke Strikes Fast. You Should Too. Call 9-1-1.

Mid-Carolina AHEC is focusing on stroke education through our CE classes and our American Heart Association (AHA) Training Center. We are offering the University of Miami's Advanced Stroke Life Support (ASLS) course several times a year. ASLS is a simulation-based curriculum developed to educate prehospital, emergency department (ED), and stroke unit providers on the management of acute stroke patients. ASLS teaches stroke epidemiology, risk factors, focused neurologic assessment, differential diagnosis, and detailed stroke management.

Through our AHA classes, every Basic Life Support (BLS) participant is taught the signs of stroke and encouraged to act fast by calling 911 to save their life or the life of a loved one. In our Advanced Cardiac Life Support (ACLS) classes, our instructors expand on BLS by discussing differential diagnosis, organization of ED care, and fibrinolytic therapy. Our hope is that through education, laypersons will become more aware of stroke symptoms, and our healthcare providers will better manage stroke patients. Through awareness, our goal, as is the American Heart Association's, is to reduce death and disability from heart disease and stroke.

For more information, visit Mid-Carolina AHEC online at www.midcarolinaahec.org.

2009 Statewide Recruiting Trip to Kansas City

*Karen Turner, Family Medicine Residency Coordinator,
Trident/MUSC Residency Program*

The American Academy of Family Physicians' National Conference for Students and Residents was held on July 30-August 1, 2009 in Kansas City. This is an annual conference that affords family medicine residents and medical students the opportunity to learn more about residency programs, attend lectures and participate in several hands-on learning opportunities. Conference topics included career planning, practice management, clinical skills and research.

Throughout the conference, all eight Family Medicine Residency Programs from South Carolina stayed busy at the recruiting booth, meeting medical students and explaining to them the benefits of completing residency training in South Carolina. A total of 101 medical students from around the country visited the booth and were eager to learn more about South Carolina and our residency programs. Each left with a small memento from the state and were encouraged to continue their education in the Palmetto State.

This year's conference was a success for each South Carolina Family Medicine Residency Program and for the residents and students that attended. Special thanks to Becky Seignous, Director of Recruitment and Retention Programs at South Carolina AHEC and Jackie McBride, Program Coordinator at Self Regional Family Medicine Residency Program, for their help in the planning and organization of this year's event! For more information about South Carolina AHEC's Family Medicine Programs, visit www.scahec.net and select Graduate Medical Education.

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Pee Dee AHEC Health Careers Program Success Story

*Tavy Smalls, BS, Health Careers Program Coordinator,
Pee Dee AHEC*

Pee Dee AHEC was proud to have the largest group of summer interns in their region's Health Careers Program history participating in the 2009 Summer Enrichment Program. The Health Careers Academy is offered during the school year and students were introduced to many different topics that helped prepare them for possible internship placements.

Materials that were covered relate to HIPAA regulations, workplace etiquette, safety, and proper dress in a healthcare environment.

Twenty-eight ambitious high school students began interning in the Pee Dee region in June of 2009. Each student completed 75 work hours in an area of their interest at a healthcare facility. Some students decided to continue volunteering at the site following the end of their internship experience. These opportunities allowed students to gain valuable experience during the summer, which will aid them when it's time to decide on a college major and a future career in healthcare.

Students were supervised by healthcare professionals and interned in hospital departments such as the medical laboratory, emergency services, oncology, administration, neonatal intensive care unit, surgery, and women's health services. Other work sites within the 12 county area included a veterinarian's office, physical therapy offices, and rural healthcare clinics. Many of the facilities reported that the health career students worked very hard and in a professional manner while in their work environments.

For more information about the Pee Dee AHEC Health Careers Program, visit www.peedeeahhec.net.



Sabrina McFadden, Pee Dee HCP student, is being presented a stipend by Tavy Smalls for her work experience during the summer.

2009 Health Careers Summer Institute Promotes Diversity in Healthcare

Angelica Christie, Health Careers Program Coordinator, South Carolina AHEC



Students participate in academic sessions at the 2009 Summer Institute at Lander University.

The theme for the 2009 South Carolina AHEC Health Careers Summer Institute was "Promoting Diversity in Healthcare". The Summer Institute is an annual four-day event designed to provide an intensive health career exploration opportunity for minority and disadvantaged students from across the state. The campus of one of South Carolina's colleges or universities serves as the venue and provides a residential experience that promotes the state's institutions of higher education. This year the Institute was held on the campus of Lander University.

The regional AHEC sites facilitated the application process to identify the 96 high school and undergraduate students selected to participate in the 2009 Summer Institute. Students participated in 45 hours of interactive instruction and activity that included topics such as academic growth and skills development. All sessions were facilitated by educators and practicing professionals.

Upstate AHEC Health Careers Program (HCP) participant and Gaffney High School senior Brittany Graham found her participation useful. "I had a great time at the Institute," stated Brittany. "It gave me a lot of information that will help me out."

South Carolina AHEC is especially pleased to have HCP completers Eboni Herbert, FNP, BC, and Rozalynn Goodwin, MHA, as featured speakers of the 2009 Institute. Ms. Herbert has recently completed certification requirements to practice as a nurse practitioner within the state of South Carolina. Ms. Goodwin is the Director of Policy Research at the SC Hospital Association. Their professional successes support their status as health professions role models.



An annual highlight is the Leadership Banquet.

Student accomplishments are acknowledged each year during the Leadership Banquet held the last evening of the Institute. Congratulations to the 2009 award recipients:

Pictured Left to Right:

Tierra Sumpter - Mid-Carolina AHEC Student of the Year

Brianna Kirkland - Lowcountry AHEC Student of the Year

Javae McWhite - Pee Dee AHEC Student of the Year

Ma'Kelle Chaplin - Upstate AHEC Student of the Year & South Carolina AHEC Student of the Year



Natasha McElrath (Upstate) - Essay Competition Winner

Demetria Bannister (Mid-Carolina) - Talent Competition Winner & Peer Role Model Award

De'Ashia Lee - Lowcountry AHEC Scholarship Recipient

Tiearra Sumpter - Mid-Carolina AHEC Scholarship Recipient

Lindsay Robinson - Pee Dee AHEC Scholarship Recipient

Tyler Rogers - Upstate AHEC Scholarship Recipient

Contact your regional AHEC Health Careers Program Coordinator for information about the 2010 Summer Institute.

South Carolina AHEC Provides Intensive Health Careers Preparatory Summer Experience

Angelica Ellman Christie, MEd, Director, Health Careers Program

Motivation, dedication, education and simulation fueled the week of May 31-June 5 for the next generation of nurses, dentists and physicians on the campus of the Medical University of South Carolina in Charleston. The South Carolina AHEC 2009 Nursing, Dental and Medicine Careers Academy hosted 31 undergraduate students from across the state who are interested in learning about the training opportunities and practice needs of the respective health fields in South Carolina.

The 2009 Academy served as the inaugural presentation of the medicine careers track. The Academy is designed to increase the acceptance, retention, and graduation rates of under-represented minority and disadvantaged students for specified health training programs in South Carolina. Academy acceptance is based upon a competitive application process.

Interdisciplinary didactic sessions, clinical observations and skill simulations serve as major components of the Academy. Networking to support the identification of peer and professional role models is an important component of the Academy. Dinner forums provide a relaxed venue for networking and the sharing of information with students enrolled at the Medical University of South Carolina who serve as panelists during the evening dinner events.

"Listening to the student panel was exactly what I needed," reflects sophomore Deborah Bartley who found the Academy inspiring. "It opened my eyes to the many opportunities out there. I enjoyed every bit of the Academy." Ms. Bartley plans to apply for admission to the upper division of nursing.

Admissions personnel provide personal transcript evaluation and forums with practicing, retired and student practitioners offering participants an invaluable perspective on the field of nursing, dentistry and medicine.

The week culminates with poster presentations that address topics associated with health disparities that affect South Carolinians. The presentations are critiqued by MUSC faculty members.

Since the Nursing Academy's 2004 inception, 29% of Fellows are progressing through pre-nursing programs, 19% are currently enrolled in nurse training programs, and 12% have entered the nursing profession, all in South Carolina. Since 2006, an additional 13% of the Dental Academy Fellows have been accepted to the MUSC College of Dental Medicine, the only dental training school in South Carolina.

Jessica Cook, a 2006 Fellow, was accepted to the College of Nursing at the University of South Carolina in Columbia, SC in the fall of 2009. She considers her participation in the Academy as a "great experience that has prepared me mentally and socially for my future endeavors. I can now utilize everything I

learned during the Academy - from the panel discussions down to the research I conducted while spending long nights working on my project."

Following the Academy, 2009 Fellow, La'Gloria Chisolm visited the South Carolina AHEC Health Careers Program Facebook® page and posted, "I haven't quit telling people about my wonderful experience during the Academy. Thank you so much. AHEC will forever be a part of my 'my family'".

The Academy is an annual event that takes place on the campus of the Medical University of South Carolina during the first week of June. The South Carolina AHEC partnered with the Johnson & Johnson Campaign for Nursing, REACH US: SEA-CEED, the Medical University of South Carolina Colleges of Nursing, Dental Medicine and Medicine, and the Medical University of South Carolina Library for the 2009 Academy. To view the posters presented during the 2009 Academy, and for additional information about the Health Careers Program, visit the South Carolina AHEC webpage at www.scahec.net.



Academy Fellows in the Dental Track Tour the MUSC College of Dental Medicine.

Career Spotlight: Harvey Davis, PharmD, RPH

Angelica Ellman Christie, Health Careers Program
Director, South Carolina AHEC



While a student at Holly Hill Roberts High School, Harvey Davis was an exceptional student who demonstrated a high proficiency for math and science. This allowed him to enroll in an advanced level chemistry course during his sophomore year. The instructor of that course was pleasantly surprised when Harvey

"brought the goods" and mastered the coursework. His academic performance led his chemistry teacher to question his future plans. At that time, Harvey's only thought was a career in the health field that "primarily dealt with math and chemistry". His teacher's immediate response was to encourage Harvey to become a pharmacist.

Dr. Davis followed-up on this encouragement by becoming involved in the Lowcountry AHEC Health Careers Program. His participation provided opportunities to explore a variety of health professions and allowed him to shadow practicing health professionals. This experience helped to solidify his interest in the field of pharmacy.

Following graduation from high school, Dr. Davis enrolled at Francis Marion University as a chemistry/pre-pharmacy major. He was then accepted to the University of South Carolina College of Pharmacy where he completed a doctorate in pharmacy (PharmD) with cum laude honors in 2007. As a USC student, Dr. Davis earned several academic based honors including President's Lists, Dean's Lists, and he received the Plough and Life Scholarships.

Dr. Davis is employed at the William Jennings Bryan Dorn Veteran's Affairs Medical Center in Columbia, SC, as a staff pharmacist. His responsibilities include: medication reconciliation, discharge counseling, dispensing and drug monitoring. Having a good work ethic, determination, and faith are key ingredients in his personal success. Dr. Davis lists the academic subjects he uses in his daily work as chemistry, biology, algebra, public speaking and psychology.

When asked what he likes most about his job, Dr. Davis responds, "I like the discharge process. After speaking with members of the healthcare team about which medications need to continued or be discontinued, I then fill those medications and counsel the patient and caregivers about each drug given."

The majority of Dr. Davis' patient population is elderly and requires specific pharmaceutical care. Dr. Davis is currently preparing to become a certified geriatric pharmacist (CGP). As a licensed pharmacist, he is required to have two years of experience to be eligible to take the Certification Examination in Geriatric Pharmacy.

Despite the award of several academic scholarships, the cost of education proved to be challenging for Dr. Davis, as it does for many health professions students, "Many of my classmates graduated with \$65,000 to \$80,000 of student loans. However, with the high demand for pharmacists and competitive salaries, paying these off will be no problem."

Dr. Davis encourages students to explore a variety of health careers to help them make an informed decision about a career goal.

"The best way to determine if you really are interested in a certain career field is to volunteer or shadow as much as possible. Not only in the field you would like to enter, but other fields that work with or around your chosen field as well."

For students who identify an interest in the field of pharmacy, Dr. Davis has three suggestions: "learn how to adapt to the many changes you will experience throughout your journey; know your strengths and weaknesses and use them both to your advantage; and try to enjoy yourself whenever you can."

His leisure time is spent playing tennis, listening to music, and spending time with family. He also enjoys traveling, attending concerts and eating great soul food.

*** Specific questions about his journey to become a pharmacist may be forwarded to Dr. Davis at Harvey.Davis@va.gov.*

Ramage Award Presented to James Stallworth, MD

The fourth Annual Raymond C. Ramage, MD Award for Leadership in Humane Education was presented to James R. Stallworth, MD, Associate Professor of Pediatrics, USC School of Medicine, on June 12, 2009 at the Residency Graduation.

Dr. Libby Baxley, Professor and Chair of the Department of Family and Preventive Medicine at the University of South Carolina, School of Medicine (SOM) presented the award to Dr. Stallworth.

The Ramage Award was established by the South Carolina AHEC to recognize a deserving faculty member in a specialty other than Family Medicine. The award is based on a similar award, The Halford Award, which recognizes leadership in humanism in Family Medicine. Dr. Raymond Ramage was an integral part of the formation of the South Carolina Consortium of Community Teaching Hospitals in 1970 and was a "founding father" of the South Carolina AHEC in 1972. From 1979 to 1982, he served as chairman of a task force on graduate medical education charged with developing and integrating the state's medical education schools and teaching hospitals, and he served as Governor Carroll Campbell's appointee on the SC Commission on Higher Education from 1988 to 1996.

Dr. Baxley said "From day one, Dr. Stallworth was known to all as the standard-bearer for medical student education. His love for medical education has been a lifelong pursuit, and he has perfected it like no other. Not only does he teach and mentor students and residents, but he is often called on by faculty, seeking both clinical and professional and sometimes personal advice. Perhaps the greatest gift for which Jim Stallworth is recognized is that of being able and willing to provide his learners the gift of honest, well crafted and delivered feedback, with a singular goal of making each and every trainee he works with become a better physician. It is a responsibility that he takes very, very seriously."

Dr. Stallworth's career is defined by compassion and service and a true love for patients, learning and learners. During his career, Dr. Stallworth has been



the recipient of multiple teaching awards of the highest nature within the SOM, including:

- 8 O'Neill Barrett Teaching Excellent Awards
- 10 Faculty Teacher of the Year Awards
- 3 Resident Teacher Awards
- 6 Teaching Advancement Awards
- 14 Student-Invited String of Pearls Lectures
- 12 Times Invited to be Graduation Class Marshal

Dr. Stallworth has received this praise with typical humility and remains one of the most approachable and reliable faculty members in the school. Below are some of the comments that were contained in the support letters that accompanied Dr. Stallworth's nomination:

"Like no other teacher before, he pushed me to want to be better."

"Precious few faculty stand out in our minds as the most dedicated, knowledgeable and passionate teachers we recall, even years after we were learning from them."

"He takes the responsibility for physician training more seriously than anyone I have worked with, yet he approaches the responsibility with such effusive joy. His smile is bright, his laughter contagious, putting the learner at ease while never, ever lowering his expectations of them and for them."

"He sees you as you are, sees where you can go, and helps you go there."

"I learned to let go of thinking about how I was doing during the clinical visit and really concentrate on the patients and their needs. He always reminded us to hold close in our hearts that being present to another as a physician is one of the highest privileges we can have and also one of the deepest responsibilities."

"When we ask residents how their rotation on Pediatrics is going, they are often heard saying 'Things are going great ... I have Stallworth.'"

"I realize I will always be his student ... how fortunate that makes me"

Congratulations to Dr. Stallworth on receiving the 2009 Ramage Award!

CNA “Survival” Day Camp in the Pee Dee

*Cheryl Neuner, RNC, BSN, Continuing Education-Nursing,
Pee Dee AHEC*

One of the most personally meaningful programs Pee Dee AHEC conducted in 2009 has been the CNA (Certified Nursing Assistant) “Survival” Day Camp. This particular program took place in Lee County, one of the more medically underserved areas of the region. When making site visits, CE Coordinators Kay Lambert and Cheryl Neuner were made aware of the lack of continuing education available to the CNA’s in the area.

While interviewing Emily Price, Director of Nursing and Sheri Baytes RN, Staff Developer/Infection Control Nurse of McCoy Nursing Center they described how little outside continuing education is made available to the CNA’s in the area. This group of healthcare providers is often the “front-line” caregivers in residential facilities. Unfortunately, this population of healthcare workers typically have the least amount of formal training and are also the least financially compensated as well. Because so often they are the “eyes and ears” of the facility, CNA’s would logically be the first caregivers to determine changes in a resident’s condition. Therefore, it seems reasonable that CNA’s receive some assessment training related to common problems identified with the elderly so that they could easily recognize and convey their findings to the licensed staff ultimately supervising the care of these patients.

The day of the site visit it was decided that they would design a brief day camp that would stress to the CNA the identification of commonly encountered status changes seen in the geriatric population. These included hyper- and hypoglycemia, respiratory changes, pain, changes in cardiac and neurological status, skin changes and dehydration. We decided to give it a “Survivor” type of theme not only to make the gathering entertaining but to stress that we as nurse educators recognize the importance and the difficulty of the care that they provide.

Pee Dee AHEC enlisted the help of Chireen Hyler, RNC, MSN to write and deliver the curriculum and decided to offer two 1/2 day programs to allow as many staff as possible to attend without compromising patient care. The hosting facility, McCoy Nursing Center, joined forces to help finance this education. Many of the licensed staff took internal ownership of making this

education a reality for the CNA’s - even donating registration fees for their co-workers.

The first CNA “Survival” Day Camp had 10 participants. Each of the participants were presented with camouflage gift bags and totes to complement our theme and hopefully make each of them feel special and appreciated for their efforts, not only in the service they provide to their patients, but in their efforts to pursue continuing education so relevant to their jobs in healthcare. Chireen Hyler, Program Instructor and former AHEC Employee, was supportive and excited to provide this education. Her delivery of the program was done in a humorous style that has made her a favored instructor.

Following the program Pee Dee AHEC received this statement from Sheri Baytes, RN-McCoy Nursing Center: “The information was presented in a way that was easy to understand and fun as well. The feedback from all of the participants in the class was very positive and each and every participant would like to have future classes. How awesome to have something of this level available to the community”? They also received many complimentary comments from the participants. Pam Whack, CNA stated, “It was great! Very informative-I learned a lot. I will definitely refer this program to others”. Kelly Steele, CNA remarked, “I would love to have more classes close by so that I can go.”

In closing, this program qualifies as a success story because it epitomizes one of AHEC’s core service goals, which is to create and advance community based academic partnerships and other alliances for the education and continuing competency of primary healthcare providers. It represents AHEC working with healthcare providers in an economically disadvantaged community and supportive professional co-workers going the “extra mile” to make education available to those less economically advantaged. The sum of these efforts made education available at the grass roots level. Now that’s an AHEC success!

For additional information, contact Cheryl Neuner at cneuner@mcleodhealth.org or www.peedeeahhec.net.

SCRIPT Leads Students to Communities

The South Carolina Rural Interdisciplinary Program of Training (SCRIPT) is a statewide program sponsored by the South Carolina Area Health Education Consortium in collaboration with Lowcountry, Mid-Carolina, Pee Dee, and Upstate AHECs. The program started in 1994 with federal funding and continues today with state funds. After 16 years, SCRIPT has successfully graduated 823 participants.



SCRIPT seeks to prepare health professions students to deliver culturally acceptable care in rural settings from an interdisciplinary, community focused perspective. Living and practicing in a rural community enables health professions students to learn that rural healthcare presents unique challenges as well as opportunities for a positive, high-quality lifestyle, both personally and professionally.

In 2009, SCRIPT held four statewide sessions in 19 rural counties. Forty-two students from five universities and nine disciplines participated this year. Students from The Medical University of South Carolina, The University of South Carolina, Clemson University, Winthrop University, and South Carolina State University participated in SCRIPT 2009. The following disciplines were represented: health administration, dental, medicine, nutrition, speech therapy, pharmacy, social work, physician assistant, and nursing.



SCRIPT 2010 recruitment has begun. For more information on SCRIPT, please go to www.lcahec.com/script.html.

Pee Dee SCRIPT Students Immersed in Community Projects

Traci Coward, Pee Dee AHEC Health Professions Student Coordinator

This year's SCRIPT students in the Pee Dee were involved in two exciting community projects. One project was the Putting Prevention Into Practice (PIIP) program and the other was a series of Lunch-n-Learns.

A group of seven students worked with Clarendon Memorial Hospital and the Coastal Plain Rural Health Network with the PIIP program. The purpose of this collaboration was to work with 14 local medical centers to increase patient knowledge and understanding of prevention of poor health outcomes. In order to achieve this goal, prevention assistants were placed in participating health offices to help the physicians and nurses stay aware of the upcoming prevention testing for each patient. The SCRIPT students worked on the project evaluation piece by collecting data from 11 of the sites. Sites were: Black River Healthcare in Manning, Kingstree, Olanta, Timmonsville, and Greeleyville; Black River Healthcare - Women's Center, Kingstree; East Clarendon Medical Center; Clarendon Surgical Specialists; Manning Medicine; Palmetto Primary Care; and Williamsburg Family Medicine. Students first developed interview questions for the providers, health staff and patients. Then, they interviewed these individuals and compiled the data. Outcomes of the evaluation revealed barriers to prevention that included lack of money, transportation and language translation. The PIIP program is funded through a grant from Duke University and The Duke Endowment.

The other group of students worked with the Lake City Chamber of Commerce. These students hosted a series of Lunch-n-Learns for the community and the local Senior Citizens Center. The students presented educational sessions on topics including diabetes, hypertension, nutrition and exercise. Being an active member in the community was an enjoyable learning opportunity for the SCRIPT students and gave them great exposure to rural living in South Carolina.

For more information, please contact Traci Coward at Pee Dee AHEC at (843) 777-5345 or tcoward@mcleodhealth.org.

Health Field Students Work in Rural Areas: SCRIPT Brings New Perspectives on Life to Students

Linda Salsberry, The Press and Standard

Jaleel Jennings, a pharmacy student at the Medical University of South Carolina, learned during his one-month-clinical rotation at the Medicine Shoppe Walterboro that in a rural area, "You've got to be authentic!"

Jennings was one of 12 students to participate in SCRIPT, South Carolina Interdisciplinary Program of Training; a five-week summer practicum where students gain not only college credit but experience rotations in various fields of healthcare in rural or underserved areas of the Lowcountry.

The program is coordinated by the four Area Health Education Centers in the state. This year, according to Diane Kennedy, Executive Director of the Lowcountry AHEC, 43 students were involved in SCRIPT.

Kennedy explained the program started in 1994 with federal funding and continues now with state funds. So far, over 800 students have completed SCRIPT.

At a closing session Friday, students met for lunch, evaluation and reports at the AHEC office on Medical Drive.

Jennings was part of a five-member team that decided to continue their experience by planning a fund-raiser in Colleton County. Working with the United Way, he, Yolanda Smith, Meagan Stoll, Melody Curry and Molivia Bright have planned Midnight Pink at Walterboro Family Bowl. The group is looking for sponsors and individuals and teams to bowl from 7 p.m. to midnight July 11. All funds raised will benefit breast cancer awareness and education programs.

Colleton, Bamberg and Hampton counties, according to their report, have the highest rate of breast cancer in the state. They also reported that causes are unknown and it is uncertain what may help prevent breast cancer. The chance of being diagnosed with breast cancer increases as you age.

Before the actual reports, students received the SCRIPT talking stick from Emily Warren, AHEC's Health Professions Student Coordinator, and briefly shared what they learned — an 'aha' moment with others.

Stoll, for example, said there is a huge difference working at Hampton Regional Medical, with 32 beds, compared to 600-bed hospitals where she has also gained experience.

Lauren Keeler, also a MUSC pharmacy student, worked in Beaufort County, and visited a migrant clinic and the campsites where migrant workers lived.

"There are so many more opportunities than the typical retail pharmacy," she said.

Smith is a nutrition student at South Carolina State University. She did her rotation at Colleton Medical Center and was surprised at how many different disciplines work together.

Bright, a nursing student at SCSC, worked at the Hampton office of the Department of Health and Environmental Control, a rotation that also had her visiting Colleton County. She said DHEC is "close-knit" and has many services, like children's rehabilitation, that she didn't know the agency provides.

"I probably want to pursue public health," she said.

Curry worked at the Colleton DHEC office and discovered that a job may "start one way and end up with a whole lot more." She said she had to learn how to communicate without language, especially needed was Spanish.

"I learned the importance of being culturally competent," she said.

Karen Mao, a MUSC medicine student, did rotations in Hollywood and Orangeburg and said both were culturally different than what she was used to growing up in Charleston. One office began the day with devotions, a spiritual aspect that she grew to love.

Mao received the Order of the Pine Cone, an actual large pine cone and a certificate, given to the student who, according to Kennedy, most "gets it," — the differences and challenges of meeting the needs of patients in a rural setting.

Other students in the program were: Anesha Maxwell, MUSC, medicine; Brittany Klein, University of South Carolina, medicine; Tonisha Maddox, SCSU, social work; Nettie Shuler, SCSU, nursing; and Michael Lance, USC, pharmacy.

Reprinted with permission of The Press and Standard. Originally published on Tuesday, June 23, 2009.

Dr. Lucas Receives 2009 Halford Award

The 2009 South Carolina AHEC James G. Halford, Jr., MD Award for Leadership in Humane Education was bestowed on Jamee Lucas, MD, on July 17, 2009 at the South Carolina Academy of Family Physician's Annual Meeting in Litchfield Beach, SC.

The Halford Award is presented to a Family Medicine residency training program faculty member in recognition of outstanding leadership in providing humane education. Award winners demonstrate a caring attitude and respect for patients, residents and students; value human dignity; demonstrate a passion and joy for learning, working and playing with others and participate in community service activities.

Dr. Lucas graduated from the University of Kentucky College of Medicine and the Richland Memorial Hospital Family Medicine Residency Program. Dr. Lucas has been an integral part of the Palmetto Health Richland Family Medicine Residency Program since she graduated, serving as Director of Procedural Training, Adjunct Clinical Professor, Residency Training Program Director, Director of Faculty Development and now as Vice Chair and Clerkship Director of the Department of Family and Preventive Medicine at the USC School of Medicine. She has received numerous awards and honors through the years for her patient care and teaching skills.



Dr. Lucas' colleagues had impressive words of praise when nominating her for this award:

"Learners appreciate Dr. Lucas' clear, thorough teaching style as well as her ability to adapt her approach to fit any learning style of her pupils. Because she demonstrates and values the physician skills necessary to address such important issues as patient comfort, disease with dignity, physician-patient relationships, and care in the context of family and community, she often and willingly initiates discussions with her learners to explore their approach to these matters. More importantly, she models sensitivity and humanism in her own patient care duties making this the most powerful teaching tool she possesses. It is not uncommon for students, residents, and colleagues to say, 'I want to try it Jamee's way'."

"Dr. Lucas is a respectful and rigorous educator. She expects hard work, integrity, and thoroughness from her learners, and they excel while working to meet her expectations. Students consistently praise her for challenging them, and one student evaluation read: 'Dr. Lucas makes us want to be more prepared. We end up learning more to make sure we are ready for her questions and to take better care of our patients!' "

"While demanding, Dr. Lucas makes it clear that her intentions are to help her learners become the best physicians or educators they can become. Because her goals are her learners' success, students, residents, and colleagues readily seek out her feedback in an attempt to better themselves as clinicians and teachers. She is able to give constructive, pragmatic advice that is effective and meaningful in a manner that is not intimidating or demeaning – she truly makes you feel as if she is simply "on your side".

"While she lives a balanced life with her husband and daughter and with such hobbies as rowing and painting, it is clear that her work is more than just a job to her. She genuinely enjoys her career and works to further her own skills and perspective on a continual basis. She is dedicated to her patients' wellbeing, her learners' training, her colleagues' satisfaction, and her practices' longevity and excellence. Dr. Lucas has served in every leadership capacity in the Department of Family Medicine. Her leadership skills are exceptional because of her keen ability to put vision into practice, but more importantly due to her firm belief in doing what is best for patients, learners, colleagues, and her community."

Congratulations to Dr. Lucas, 2009 South Carolina AHEC James G. Halford, Jr., MD Award for Excellence in Humane Education.

Larijani is New Upstate Coordinator

On August 17, 2009, Rahha Larijani became a Health Professions Student (HPS) coordinator with Upstate AHEC. Prior to joining the AHEC team, Rahha was an award-winning Senior Professional Healthcare Representative for Pfizer Pharmaceuticals. In that position, Rahha was responsible for the primary care practices in most of the same counties served by Upstate AHEC. Consequently, Rahha brings to her new role relationships and contacts that will be of great value to her students. Rahha honed her considerable interpersonal skills through earlier jobs in her career as a Sales Professional and Client Relations Manager at National Linen Service.



Rahha earned her Bachelor of Science degree from East Carolina University, her Masters of Public Administration in Healthcare from Troy State University, and her Executive Juris Doctorate in Healthcare Law from Concord Law School. She is a member of Women in Business and the American Public Health Association, as well as a National Health Service Corps Ambassador.

A native of Long Island, New York, with family ties to Persia, Rahha and her husband, Brian Herrick, now live in Greenville where they are busy raising two active, beautiful boys: Kamran and Kiyan. In her spare time, Rahha likes to travel, read, run, mountain bike, and participate in Triathlons.

Lowcountry Welcomes Chatman

Natasha Chatman, M.Ed. is the Health Careers Program Coordinator for Lowcountry AHEC. She is a graduate of the College of Charleston where she earned a Master's degree in science and math education and Bachelor's degrees in chemistry and biochemistry. Prior to working with AHEC, she worked as a chemistry teacher at Summerville High School.



As the Health Careers Program Coordinator, Natasha is responsible for providing activities, programs, and other support for middle school, high school, and undergraduate students who are interested in healthcare professions. Natasha can be reached at chatmann@lcahec.com.

Neely Joins Upstate Team

Elizabeth Neely joined Upstate AHEC in July as an Administrative Assistant. A native of Greenville, Elizabeth is also a full-time student at North Greenville University in Tigerville, SC, where she is a junior pursuing a degree in marketing. Prior to coming back to Greenville, Elizabeth completed her first two years of college at North Georgia College and State University in Dahlonega, GA.



Elizabeth is the youngest member of both the Upstate AHEC and her "other" family, which consists of mother Beth (who is also an Administrative Assistant), father Bruce (who owns a home inspection company) and two brothers, one in the US Army and one in sales.

Elizabeth is an active Alumni of Alpha Gamma Delta Sorority and is an accomplished singer. She is also a formidable athlete and runner.

Upstate Welcomes Bemis



Prior to joining the Upstate AHEC team as a Healthcare Workforce CE Consultant in July, Stephanie Bemis, CMA, worked as a Medical Assistant Program Coordinator for Centura College in Columbia, SC. While there, she coordinated all

aspects of the MA program including advising students, hiring and terminating instructors in conjunction with the School Director, attending and conducting in-service training seminars, insuring that all programs operated under Department of Education & Accrediting Commission requirements, and teaching and substituting for instructors as needed.

Stephanie attended Greenville Technical College and earned her Certification in Medical Assisting through the AAMA.

Currently, Stephanie lives in Greenville with her husband and son, and in her spare time, enjoys playing darts competitively.



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CALL FOR ARTICLES:

The editorial staff of "South Carolina AHEConnects" welcomes the submission of articles, success stories and upcoming events for the Winter Edition.

Please forward information, articles and photos to Ragan DuBose-Morris at duboser@musc.edu. The deadline for submissions is December 1, 2009.